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## BIB DATA SHEET

CONFIRMATION NO. 1869

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/551,189	09/29/2005 RULE	073	3735	66376-365-7	
<b>APPLICANTS</b> Falko Skrabal, Graz, AUSTRIA; Jurgan Fortin, Graz, AUSTRIA; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AT04/00117 04/01/2004 <b>** FOREIGN APPLICATIONS *****</b> AUSTRIA A 509/2003 04/01/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b> 05/25/2006					
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and /NAT/NITHITHADHA/ Acknowledged NAT/NITHITHADHA/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> AUSTRIA	<b>SHEETS DRAWINGS</b> 5	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> DYKEMA GOSSETT PLLC FRANKLIN SQUARE, THIRD FLOOR WEST 1300 I STREET, NW WASHINGTON, DC 20005 UNITED STATES					
<b>TITLE</b> Device and method for the continuous non-invasive measurement of blood pressure					
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		